

CLAIMS ONLY	Application Number	Filing Date
	10/787525	
	Applicant(s)	

10/787525

[illegible]

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
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48						
49						
50						
Total Indep	1					
Total Depend	3					
Total Claims	4					

May be used for additional claims or amendments

	Indep	Depend	Indep	Depend	Indep	Depend
51						
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100						
Total Indep						
Total Depend						
Total Claims						